POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*M*	7091	8/17
O.I.P.E. CLASSIFIER			8-22-00
FORMALITY REVIEW		852	09-27-00
RESPONSE FORMALITY REVIEW	*M .lt*	625	03-27-01

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
–	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim Final	Original	9-20-02	9-28-03	6-13-04	Date
(1)	1	✓	✓	✓	
2	2	✓	✓	✓	
3	3	✓	✓	✓	
4	4	✓	✓	✓	
5	5	✓	✓	✓	
6	6	✓	✓	✓	
7	7	V	V	0	
8	8	✓	✓	0	
9	9	✓	✓	0	
10	10	✓	✓	0	
11	11	✓	✓	✓	
12	12	✓	V	V	
13	13	V	✓	✓	
14	14	✓	✓	✓	
15	15	✓	V	0	
16	16	✓	✓	0	
(17)	17	V	✓	V	
18	18	✓	✓	✓	
19	19	✓	✓	✓	
20	20	✓	✓	✓	
21	21	✓	✓	✓	
22	22	✓	✓	✓	
23	23	✓	✓	0	
24	24	✓	✓	0	
25	25	V	✓	0	
26	26	✓	✓	0	
27	27	✓	✓	V	
28	28	✓	✓	✓	
29	29	✓	✓	✓	
30	30	✓	✓	✓	
31	31	✓	✓	0	
32	32	✓	✓	0	
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If more than 150 claims or 10 actions
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